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Accreditation of Hospital Establishments in Morocco What, How, and Why?

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ABSTRACT

The accreditation of hospitals in Morocco is an essential process aimed at ensuring the quality of healthcare provided by healthcare facilities. This process is implemented by the Ministry of Health and Social Protection, in collaboration with the World Health Organization. The primary objective of accreditation is to ensure the quality and safety of healthcare provided to patients. This includes the verification of standards and care protocols, the qualification of medical and paramedical staff, as well as compliance with health standards. Accreditation of healthcare facilities offers several advantages, including the improvement of the quality of care, the promotion of transparency, increased patient confidence, and the possibility of national and international recognition. The accreditation of health establishments is a major prospect for Morocco. This project is part of the development of the health system reform project and also medical coverage. The objectives of accreditation of hospital establishments are essentially aimed at meeting user expectations and improving the quality and safety of care. This opportunity constitutes a solid foundation and lever to ensure the organization of processes and the application of procedures to facilitate administrative and technical activities within an organization and evaluate the performance of results through the development of dashboards and quality indicators.

Keywords: *Accreditation, Quality, Safety, Satisfaction, Continuous Improvement, Care*

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Introduction

Convinced, motivated, committed, and aware of the unavoidable interest and major impact of the hospital accreditation process, on the organization and on interested parties, particularly patients, to achieve a high level of performance and improvement in the quality of the system. The decision to enroll in an accreditation process is a result that must result from a decision-making process based on an in-depth assessment of the benefits, costs, and available resources carried out by all stakeholders, accompanied by a rational reflection and supreme awareness of decision-makers at different hierarchical levels.

Demonstrated conscientious commitment and considerable leadership spirit constitute the discarded and abandoned link in the accreditation process. This means that the relationship is extremely interdependent between the decision and the commitment of decision-makers in the accreditation process.

The feedback from the accreditation experiences experienced by Moroccan hospital establishments was part of a perspective of refining and perfecting the accreditation manuals and adapting them to the specificities and particularities of Moroccan health organizations.

Objective

The objective of this article is to describe the experiences in terms of hospital accreditation in Morocco and to understand the internal and/or external issues favoring the implementation of an accreditation process adapted, effective, and adequate to our system, health, our organization, and quality management practices in our hospital establishments.

To this end, the overall analysis of the feedback from the tests and experiment carried out made it possible to draw answers, in the form of conclusions and recommendations, to the following questions:

- What are the potential risks of the hospital accreditation process?
- What are the opportunities to capitalize on by adopting the accreditation process?
- The What, the Who, the How, and by what evidence?

This last question, which constitutes the basis of the accreditation process, has often been declared and affirmed by the participants and by the visiting experts; it is a documented procedure, validated and approved by a competent authority.

- The what ? the steps of the procedure to be standardized and normalized;
- Who? Generally, the executor (the who does what?);
- The How? the sequence of steps (procedure itself);
- What evidence? traceability and tangible evidence to be safeguarded by the executor.

Question no 1: What?

The accreditation system

Framework law No. 06-22 relating to the national health system, replaces framework law No. 34-09, which stipulates in Article 31 that the accreditation system aims to provide an independent assessment of the quality of establishment services, health or, where applicable, the services provided by one or more services within these establishments, on the basis of indicators, criteria, and national benchmarks established by the “High Authority of Health” (Dahir n°1-22-

77, National Health Systèm, 2022**)**, in to ensure continuous improvement in the quality and safety of care. These national benchmarks and accreditation standards are generally considered optimal and achievable and are designed to encourage continuous improvement efforts within accredited organizations (Pomey, 2002, 2008; Seada, 2012).

However, accreditation is an assessment process that evaluates the performance of healthcare organizations by assessing their compliance with pre-established standards aimed at continuous quality improvement rather than simply maintaining minimum standards (Shaw, 2004; Devkaran & O'Farrell, 2015) which means that the accreditation process is strongly associated with the essential principles guaranteeing the improvement of the quality and safety of care and the performance of the health system results. Commitment to accreditation requirements has been linked to improving quality, improving communication and collaboration within the organization, promoting teamwork, and improvement of educational processes for all employees (EL Jardali et al., 2008).

Certainly, the accreditation process is a very effective tool for accelerating integration and stimulating the spirit of cooperation, accreditation helps organizations to introduce continuous quality improvement programs, and it makes it possible to perpetuate the spirit of leadership for quality improvement initiatives, while feedback has demonstrated the necessity and unavailability of a commitment from top management at all levels, several authors affirm that the strong commitment of management is an essential element for the success of quality initiatives. In Morocco, the weak commitment of hospital managers constitutes one of the main factors which hinder the success of the quality approach in Moroccan public hospitals (Salhi, 2014), with regard to resources, all standards relating to quality and safety require the availability and rationalization of resources, the EFQM excellence model (2013) also recommends the efficient management of resources and the responsible management of constructions, equipment, materials, and natural resources.

Support for structures plays a decisive role in the success of change particularly in motivating staff and reducing resistance (Kotter, 1996). Support measures (training, communication, and recognition of staff) are essential to successfully transition an organization towards a quality culture (Beckmann et al., 2003).

The national policy of quality and safety of care

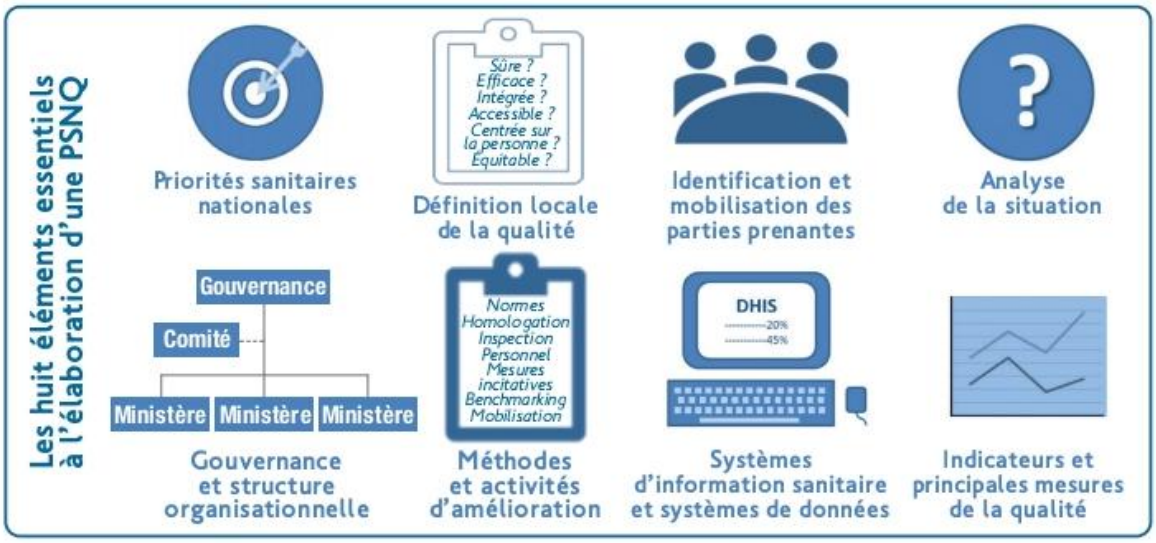
Many countries choose to focus on a national quality improvement strategy. However, it is also interesting to develop a national policy in this area in order to ensure political support, guide the strategy and its implementation, and include quality improvement efforts within the framework. broader policy (WHO, 2019).

Although the essential dimensions of quality are widely agreed upon in the health sector today, each country will likely have its own local understanding or definition of quality. The process of defining quality through stakeholder engagement and consensus building is critical to establishing a common intent and understanding of the national approach to quality. It is therefore crucial to recognize the importance of the qualitycontextualization phase. It will make it possible to better focus and develop a quality policy and strategy to meet local needs (WHO, 2019).

In Morocco, a consensus meeting was organized in 2017 by the Ministry of Health and the WHO Regional Office for the Eastern Mediterranean for the development of a national patient safety policy. This workshop was an opportunity to bring together several experts in the field of quality and safety of care to outline the main directions of the national policy on the quality and safety of care, set strategic objectives, and define an action plan on the quality and patient safety for the next five years. The debate led by the different actors in the system made it possible to identify the main levers and fundamental priorities that can be recommended.

Figure 1.

The essential elements for developing a PSNQ



Question no 2: *How?*

The hospital accreditation framework in Morocco

By subscribing to the strategic orientations of the Ministry of Health and Social Protection, in particular that relating to the regulation of the quality and safety of care, Morocco has invested a lot, to meet the essential expectations of the population and the new challenges, notably equitable access of citizens to quality health services promoting a reconciliation of the brand image of health establishments.

To this end, Morocco has engaged, with the support of the World Health Organization (WHO), in a process aimed at the development of a national accreditation program for public and private health establishments. This program was adopted pursuant to resolution 2002 of the Regional Council of Member States of the Eastern Region (EMRO) on hospital accreditation.

This approach encourages healthcare establishments to evaluate their organization, their operation, and the services provided to their users, to constantly improve their performance in terms of quality and safety of care.

As such, the hospital accreditation reference and standards manual developed includes a range of standards that allow the evaluation of aspects relating to the structure, process, and results at the level of each hospital service, taking into account the size, status, and mission of hospitals. The standards proposed in the manual concern medical services, technical services,

and administrative services, and are structured in the form of references broken down into criteria and sub-evaluation criteria according to 4 levels:

- Level 1: Bringing together “Floor” criteria that all establishments must achieve;
- Level 2: Brings together criteria and sub-criteria relating to the documentation necessary for the execution of administrative and clinical activities;
- Level 3: These are the criteria relating to the collection and analysis of data and operating results as well as the implementation of decisions to correct anomalies;
- Level 4: It concerns the development and implementation of plans for continuous improvement of performance and quality of care and services.

For each level and each sector of activity, the references are broken down into criteria, certain criteria are broken down into sub-criteria which represent specific elements making it possible to better define the elements of proof necessary to verify compliance with each of the criteria.

The manual of hospital accreditation guidelines and standards thus constitutes a “road map” that can guide hospital establishments in Morocco towards a progressive maturation of the quality approach.

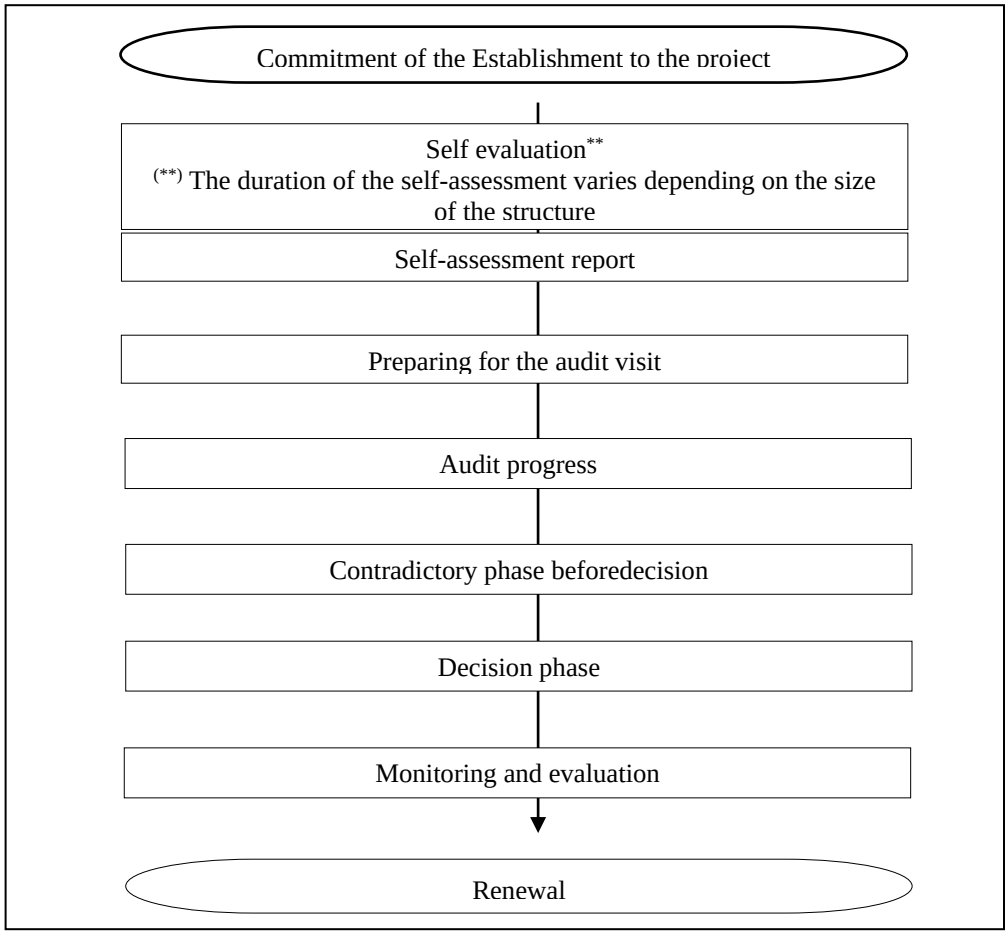
This version also took into consideration the new legislative and regulatory provisions, in particular those of Law 34-09 relating to the health system and the provision of care and Law 131/13 relating to the practice of medicine.

The accreditation procedure for health establishments in Morocco

The steps in the accreditation procedure for a hospital establishment are presented in the following flowchart :

Figure 2.

Flowchart presenting the essential steps of the accreditation procedure (DHSA, 2015).


Commitment of the Establishment to the project
Self evaluation**
(**) The duration of the self-assessment varies depending on the size of the structure
Self-assessment report
Preparing for the audit visit
Audit progress
Contradictory phase beforedecision
Decision phase
Monitoring and evaluation
Renewal

Question no3 : Why ?

The accreditation of hospital establishments is affirmed, by several authors and experts, as a process aimed at improving the quality, efficiency, and effectiveness of a health organization, including its structures, processes, and results (Nicklin & Dickson, 2009). Accreditation can serve as an essential foundation for establishing quality practices in the long term (El Jardali et al., 2013).

Leadership and creation of value for patients

Several authors affirm that the strong commitment of management is an essential element for the success of Quality initiatives. According to V. De GAULEJAC, the weak commitment of directors constitutes the main cause of the failure of quality approaches in the public hospital environment because of the bureaucratic culture which considerably alters the implementation of change through quality (Gaulejac, 2005).

What impact does accreditation have on the satisfaction of interested parties and the performance of hospital establishments?

Accreditation of healthcare facilities and satisfaction of interested parties are crucial aspects in healthcare. The main objective is to guarantee the quality of care and patient safety and meet the needs and expectations of interested parties: medical staff, managers, insurers, and other entities involved in the operation of the hospital establishments.

- *Guarantee of quality of care*: By applying specific standards in terms of quality and safety of care, by all professionals based on their skills and knowledge and compliance with validated procedures and protocols.

- *A healthy and safe environment:* Accreditation standards aim to guarantee an environment for patients and professionals, with an emphasis on the prevention of medical errors, risk management, and security of facilities.

- *Continuous improvement:* The accreditation process certainly encourages continuous improvement by identifying avenues for improvement to be able to commit to treating and correcting anomalies, particularly through the adoption of problem-solving methods and planning and the implementation of improvement actions. This promotes a culture of participatory and collective management.

- *Credibility and trust*: Accreditation strengthens the credibility of the hospital among patients, healthcare professionals, insurers, and other stakeholders. This helps implement quality assurance principles with the aim of promoting a spirit of trust between patient and caregiver and establishing mutually beneficial relationships between the hospital establishment and interested parties, an accredited health system can build a lasting relationship of trust between people and their healthcare providers (Van Lerberghe et al., 2008).

- *Satisfaction of patients and healthcare professionals:* Patients have confidence in accredited establishments because this guarantees conformity in the deployment of management standards and technical standards to achieve better quality of care satisfying patients' requirements in terms of the right to health.

- Also, the adoption of accreditation standards will make it possible to meet the needs of health professionals in terms of training and development of managerial, technical, and scientific skills.

- Among the aspects of provider satisfaction we note ‘recognition and valuation of efforts’ which have been reported as factors motivating the sustainability of performance among health professionals according to (Dieleman et al., 2006).

- *Better resource management*: The accreditation process requires more efficient management of resources, including human resources and material resources. Effective management helps optimize hospital operations and rationalize financial resources, which has a positive impact on the overall performance of the establishment.

Conclusion

In conclusion, the accreditation of hospital establishments in Morocco represents a commitment to excellence in healthcare delivery. This process, through its rigorous approach, contributes to implementing quality management standards and norms, ensuring patient safety, and strengthening the confidence of interested parties in the health system. Accreditation is not only

a quality label but also a proactive approach toward continuous improvement, thus promoting the improvement of performance and the sustainable development of hospital establishments in Morocco.

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